# PATENT APPLICATION FEE DETERMINATION RECORD
### Effective October 1, 2004

**Application or Docket Number**

10/516477

## CLAIMS AS FILED - PART I

| | (Column 1) | (Column 2) |
|---|---|---|
| TOTAL CLAIMS | | |
| FOR | NUMBER FILED | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS | 25 minus 20 = | 5 |
| INDEPENDENT CLAIMS | 3 minus 3 = | — |
| MULTIPLE DEPENDENT CLAIM PRESENT · | | ☐ |

* If the difference in column 1 is less than zero, enter "0" in column 2

**SMALL ENTITY TYPE** ☐ **OR** **OTHER THAN SMALL ENTITY**

| | RATE | FEE | | RATE | FEE |
|---|---|---|---|---|---|
| | BASIC FEE | 555 | OR | BASIC FEE | |
| | X $ 9 = | 45 | OR | X $ 18 = | |
| | X $ 44 = | | OR | X $ 88 = | |
| | + $ 150 = | | OR | + $ 300 = | |
| | TOTAL | | OR | TOTAL | |

## CLAIMS AS AMENDED - PART II

11/30/04

**SMALL ENTITY   OR   OTHER THAN SMALL ENTITY**

### AMENDMENT A

| | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA | RATE | ADDI-TIONAL FEE | | RATE | ADDI-TIONAL FEE |
|---|---|---|---|---|---|---|---|---|---|
| Total | * 25 | Minus | ** 25 | = 0 | X $ 9 = | 0 | OR | X $ 18 = | |
| Independent | * 3 | Minus | *** 3 | = 0 | X $ 44 = | 0 | OR | X $ 88 = | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐ | | | | | + $ 150 = | | OR | + $ 300 = | |
| | | | | | TOTAL ADDIT. FEE | 0 | OR | TOTAL ADDIT. FEE | |

### AMENDMENT B

| | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA | RATE | ADDI-TIONAL FEE | | RATE | ADDI-TIONAL FEE |
|---|---|---|---|---|---|---|---|---|---|
| Total | * | Minus | ** | = | X $ 9 = | | OR | X $ 18 = | |
| Independent | * | Minus | *** | = | X $ 44 = | | OR | X $ 88 = | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐ | | | | | + $ 150 = | | OR | + $ 300 = | |
| | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

### AMENDMENT C

| | (Column 1) CLAIMS REMAINING AFTER AMENDMENT | | (Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Column 3) PRESENT EXTRA | RATE | ADDI-TIONAL FEE | | RATE | ADDI-TIONAL FEE |
|---|---|---|---|---|---|---|---|---|---|
| Total | * | Minus | ** | = | X $ 9 = | | OR | X $ 18 = | |
| Independent | * | Minus | *** | = | X $ 44 = | | OR | X $ 88 = | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM ☐ | | | | | + $ 150 = | | OR | + $ 300 = | |
| | | | | | TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE | |

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.